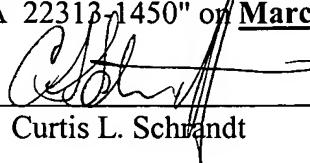




CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" on March 25, 2004.



Curtis L. Schrandt

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT : HOCHBERG, Richard

APPLICATION NO. : 10/796,462

DATE FILED : 03/09/04

FOR : 15 α -Substituted Estradiol Carboxylic Acid Esters as Locally Active Estrogens

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUBMISSION OF
SUPPLEMENTAL APPLICATION DATA SHEET

SIR:

Enclosed herewith please find a Supplemental Application Data Sheet which includes changes to the Initial Application Data Sheet previously entered in the above-identified application. More specifically, the claimed priority reference information has been corrected to reflect the information printed on the application transmittal sheet. Please enter the enclosed Supplemental Application Data Sheet in the application.

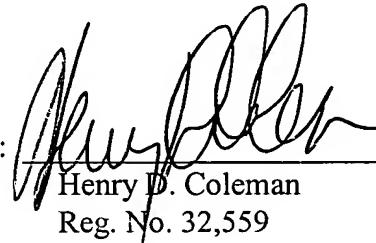
Please credit any overpayment or charge any additional fees due in connection with

this communication to Deposit Account No. 04-0838. A copy of this Submission is enclosed herewith for deposit account charging purposes.

Respectfully submitted,

COLEMAN SUDOL SAPONE, P.C.

By:


Henry D. Coleman
Reg. No. 32,559

Dated: March 25, 2004

714 Colorado Avenue
Bridgeport, CT 06605-1601
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Supplemental Application Data Sheet

Application Information

Application Number:: 10/796,462
Filing Date:: 03/09/04
Application Type:: Regular
Subject Matter:: Utility
Title:: 15 α -Substituted Estradiol Carboxylic Acid Esters as Locally Active Estrogens
Attorney Docket Number:: Y03-078US
Request for Early Publication?:: No
Request for Non-Publication?:: No
Total Drawing Sheets:: 4
Small Entity?:: Yes
Petition included?:: No
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Richard
Middle Name::
Family Name:: HOCHBERG
City of Residence:: Guilford
State or Province of Residence:: CT

Country of Residence:: US
Street of mailing address:: 100 Watering Pond Rd.
City of mailing address:: Guilford
State or Province of mailing address:: CT
Country of mailing address:: US
Postal or Zip Code of mailing address:: 06437

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Phone number:: (203) 366-3560
Fax Number:: (203) 335-6899
E-Mail address:: cosud@erols.com

Representative Information

Representative Customer Number::	28156	
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non- Provisional of	60/415,079 60/456,374	10/01/02 03/21/03

Assignment Information

Assignee name:: YALE UNIVERSITY

Street of mailing address:: 433 Temple St., 1st Floor

City of mailing address:: New Haven

State or Province of mailing address:: CT

Country of mailing address:: US

Postal or Zip Code of mailing address:: 06511